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OLDER WOMEN'S LEAGUE

FAILING AMERICA'S CAREGIVERS:

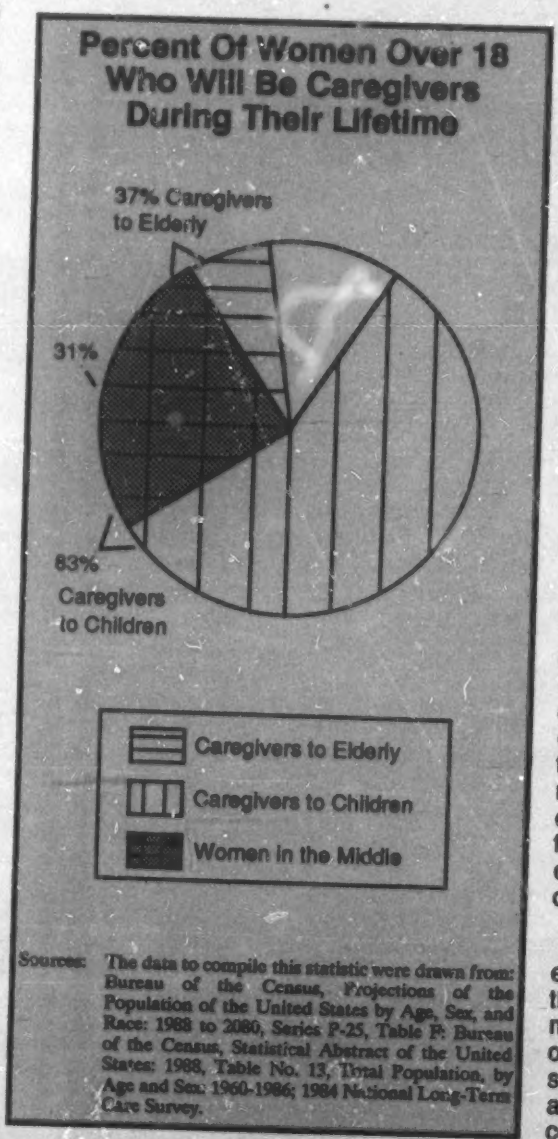
A Status Report on Women Who Care

If you are a woman, you can expect to spend 18 years of your life helping an aging parent and 17 years caring for children—and the economic, physical, and emotional price may be high. Eighty-nine percent of all women over age 18 will be caregivers either of children or parents, or both, in their lives. Nearly four out of every ten women (37%) will care for a disabled adult, while 83% will care for children.

Caregiving to the young and old has far-ranging consequences. While policy-makers have begun to focus on the caregiving problems parents face, they have virtually ignored the ever-increasing need for elder care support.

The "empty nest" left when children are grown is more and more often being filled with an aging parent who needs long-term care. As the population ages and as more women enter the labor force, the immense need for greater child care and elder care options will only grow more urgent.

Many of the same problems associated with parenting exist for caregivers to the elderly. While child care is expensive, elder care impoverishes. The tragic results of poor quality care are far too commonplace for both young and old. Child care has been the work and family conflict of the '80s, but demographics foreshadow elder care as the number one work place issue of the 1990s. And sleepless nights are the same whether caused by a sick child or an elder parent.


Percent Of Women Over 18 Who Will Be Caregivers During Their Lifetime
37% Caregivers to Elderly
31%
83% Caregivers to Children
Caregivers to Elderly
Caregivers to Children
Women in the Middle
Sources: The data to compile this statistic were drawn from: Bureau of the Census, Projections of the Population of the United States by Age, Sex, and Race: 1988 to 2080, Series P-25, Table F; Bureau of the Census, Statistical Abstract of the United States: 1988, Table No. 13, Total Population, by Age and Sex: 1960-1986; 1984 National Long-Term Care Survey.

There are up to seven million households caring for a disabled elderly person each year. Ninety-five percent of persons over 65 live at home. Even among the elderly who are disabled, 90% live at home, with family members providing practically all the care they receive. Without family caregivers, many more elderly would be forced into institutions. Yet family caregivers do their work largely without help, without resources, and without support.

Caregivers of the young and old devote enormous time and energy to their responsibilities. Like parenthood, elder care is an everyday responsibility: 80% of family caregivers to the elderly provide care seven days a week. One study estimates that caregivers to the elderly provide over 27 million days of unpaid care every week. One out of every five family caregivers to the elderly has been providing care for five years or more.

Caring for children and the elderly can be rewarding, but this report shows that for most caregivers, particularly of the elderly, the lack of support makes caregiving an act of love with grave consequences.

Mother's Day Report 1989

A Message From Lou Glasse, President of the Older Women's League

Happy Mother's Day! This is the weekend each year when Americans honor our mothers by sending chocolates, flowers, and cards to convey the gratitude we feel for the sacrifices they made for us when we were children.

But in truth, the sacrifices most women make are not limited to motherhood. A new body of data is emerging that documents the care women provide throughout their lives to children, parents, spouses, siblings, and other needy friends and relatives. Frankly, the facts are startling.

For the first time ever, American women are spending more years caring for dependent parents than for children—and millions spend additional time caring for frail or sick husbands, brothers, and other relatives.

In 1989, the "empty nest" is an anachronism. If women's "nests" empty at all, they fill again very quickly. Nearly two million women are part of the "sandwich" generation; they care simultaneously for growing children and ailing parents. Many more have only a brief respite between the time children move out and parents, aunts, uncles, siblings, or husbands require assistance.

The facts belie the stereotype that America's elderly are "warehoused" in nursing homes; only five percent are institutionalized. Nine in ten of the disabled elderly not in nursing homes receive unpaid care from relatives and friends.

Up to seven million Americans are unpaid caregivers to the elderly; the vast majority are women. Most toil without respite, doing backbreaking labor in virtual isolation. They routinely struggle to cope with the exhaustion, loneliness, brutal physical demands, and heartbreak of watching a loved one grow weaker. While children grow stronger and less dependent over time, frail or incapacitated adults most often grow only weaker and more dependent.

Our nation's health care cost containment policies are forcing patients out of hospitals quicker and sicker. These practices are increasing women's caregiving responsibilities at a time when more women are in the paid work force than ever before. More than half of the mothers of infants under a year old, and of the spouses and children of disabled elders, are in the paid work force. They face a massive, sometimes crippling responsibility from which there is often little relief. Many caregivers struggle to hold onto their jobs, but are finally forced to make an agonizing choice. For midlife and older women, the economic consequences of caregiving can be devastating.

Caregivers fill in the blanks in our health care system. When children are too sick to go to school or when parents are too weak to care for themselves, it is mothers and daughters who most often rearrange their lives to help out.

That must change. Midlife and older women cannot continue to bear almost the entire burden of providing care to increasing numbers of disabled seniors and dependent children. Men and women, young people and old, must also shoulder the responsibilities of family caregiving. But families alone cannot bear the full burden. Government and employers must do their share, too.

At present, America is failing its caregivers. Our health care system is woefully inadequate to meet the needs of an aging population. Finding child care slots is difficult for healthy children and impossible when children are sick. Services like home health care, respite care, and day care for children and adults can ease the burden on caregivers, but too often they are unavailable.

Legislation to provide more support services is urgently needed. The Family and Medical Leave Act to provide job protection for caregivers of children, parents, and spouses must be enacted. Long-term care for the chronically ill and increased wages, benefits, and training for long-term care workers are long overdue, as is increased funding for elder and child care services.

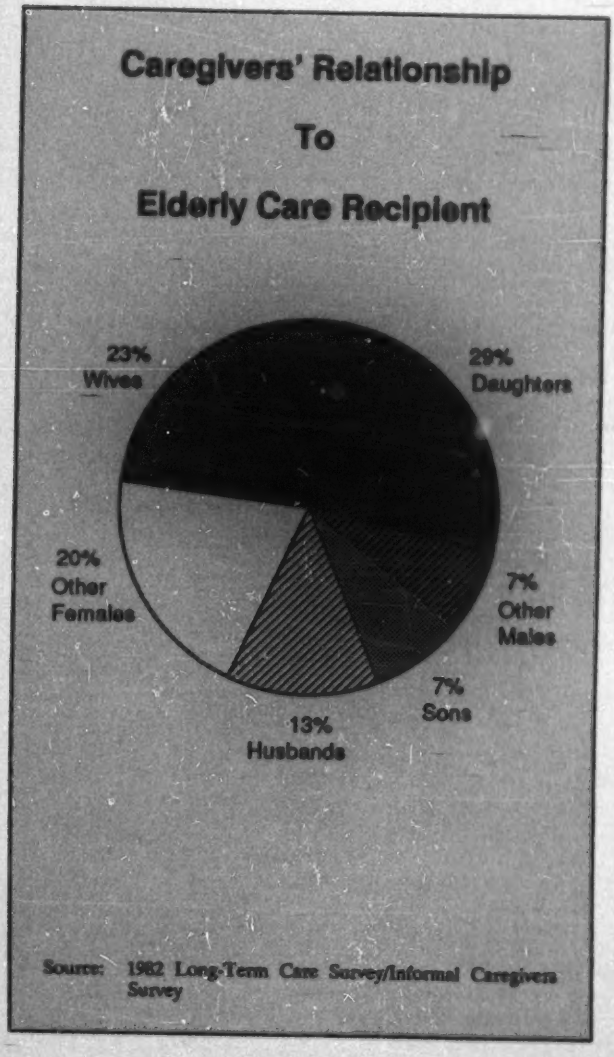
As in years past, this Mother's Day, the Older Women's League is issuing a challenge to America's policy-makers. Give your mother more than a hug and flowers. Show her you care, too. Give her a gift that can make her life better. Support America's caregivers. They have earned it!

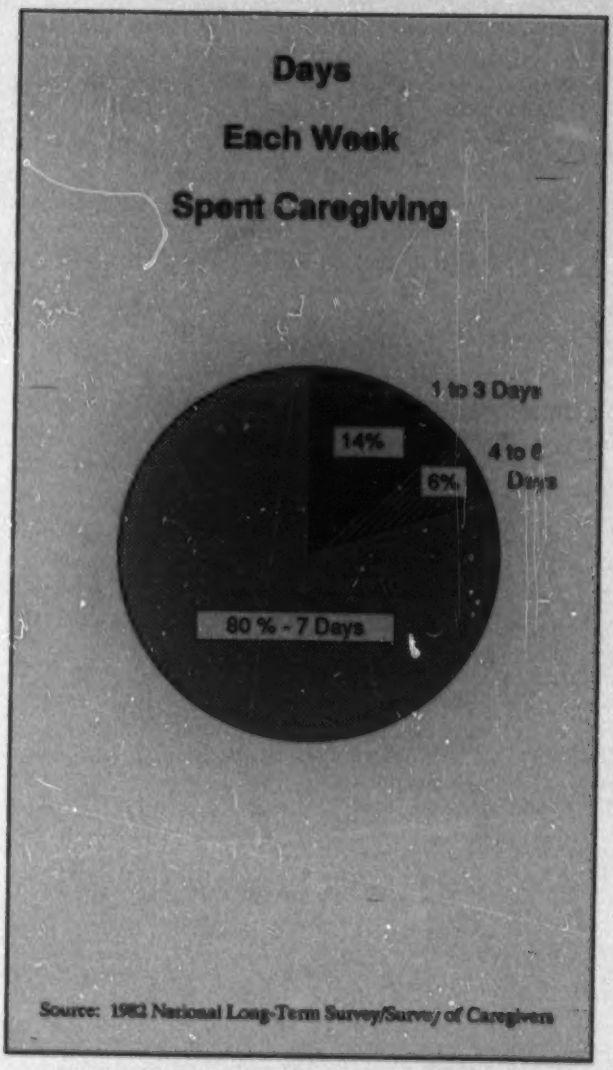
Who Are The Caregivers?

Women are. While men are assuming greater parenting and caregiving responsibilities than in the past, the paid and unpaid caregivers of the young and old are overwhelmingly female.

Originally, women may have been the caregivers because they were at home, but women's increased employment has not significantly diminished their caregiving role. Now, women simply do both. Women working full-time are four times as likely to be primary caregivers to the elderly than working men.

In responding to a national survey, nearly one in five caregivers reported she "chose" to take responsibility for the care of an elderly spouse, parent, or friend; one in three took on the job because she lived closest to the elderly person; and one in four reported she had no choice, as no one else was available or willing.





The vast majority of family caregivers are women. The average caregiver to the elderly is 45 years old, female, and married. Three out of every four caregivers to the elderly are women. Two-thirds are married. Among children who are primary caregivers, daughters outnumber sons three to one. Women provide most informal child care, with single parent families maintained by men accounting for only 3% of all families.

Thirty-five percent of caregivers to the elderly are over 65. Ten percent are over 75. As women outlive men and often marry older men, they often become caregivers to their spouses.

Many women in the "sandwich generation" have both elder care and child care responsibilities. Thirty-one percent of all women over 18 will care for both children and parents over their lifetime. Presently 1.8 million of these "women in the middle" are simultaneously caring for children while coping with elder care responsibilities. Over half are also in the paid labor force, and one in five has a parent living in her home.

Men are assuming more of a caregiving role, but most are providing help with transportation, home repairs, and financial management, rather than personal care. While no significant gender differences exist in the amount of time spent caregiving, the tasks performed are still very gender-based.

Living arrangements often must be changed to accommodate elder care needs. Almost three-quarters (74%) of caregivers live with the disabled elderly person; of these, 61% are their son or daughter. Over a third of caregivers report that they would not live with their parent if their assistance were not required.

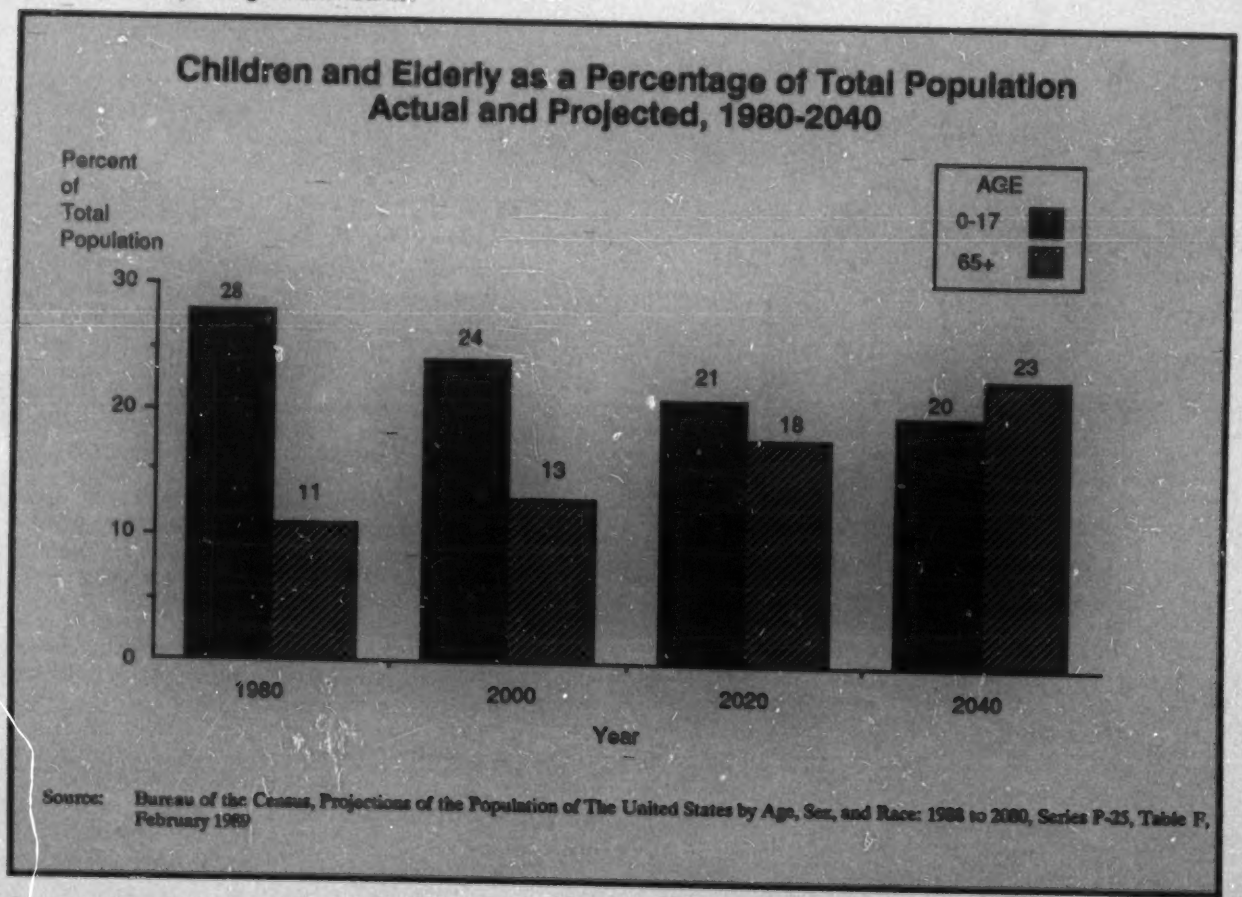
Paid caregivers of adults and children are primarily women, earning low wages, with few benefits and little training. Over 95% of home health aides, 90% of nursing aides, and 94% of child care workers are women. Average wages range from $4.25/hr. for home health aides to $4.50/hr. for nursing aides. Ninety percent of child care workers providing care in their own homes, and 58% of all other child care workers, earn below poverty level wages. Less than 50% of nursing aides have health insurance, and less than one in five has pension coverage. Anecdotal reports show an even worse benefit picture for home health aides and child care workers. The women who bathe, feed, dress, and care for our parents and children earn less than zookeepers or parking lot attendants.

America's Increasing Need for Caregivers

A significant decline in the number of family caregivers will occur in the U.S. at the same time the demand for caregiving increases. As the population ages and life expectancy increases, there will be more elderly—especially 85 and over—with chronic illnesses. Since the baby boomers have created a baby bust by having fewer children, the ranks of future caregivers will be depleted. The U.S. population "pyramid" soon will become a rectangle.

Greater numbers of women will enter the work force and stay there, unlike their mothers who left to take care of their families. More women will be juggling work and caregiving responsibilities, therefore, and will need access to better-quality, lower-cost child and elder care than is presently available.

Americans 85 and older, the group most in need of long-term care, are the fastest growing segment of the population. By the year 2000, persons over 85 will increase from the current 2.9 million to 5 million. Between 1985 and 2020, the over-65 population will more than double to over 52 million, or one in six persons.

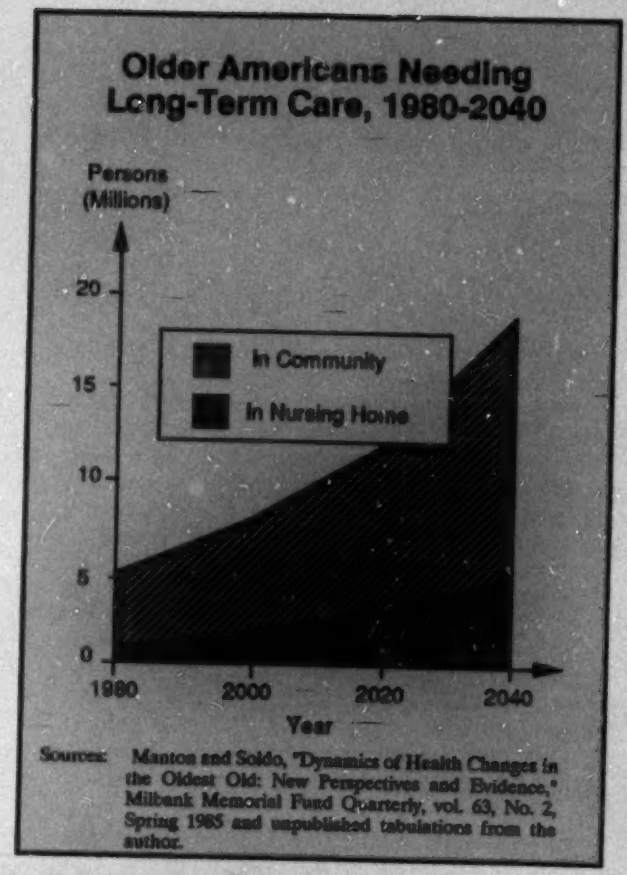


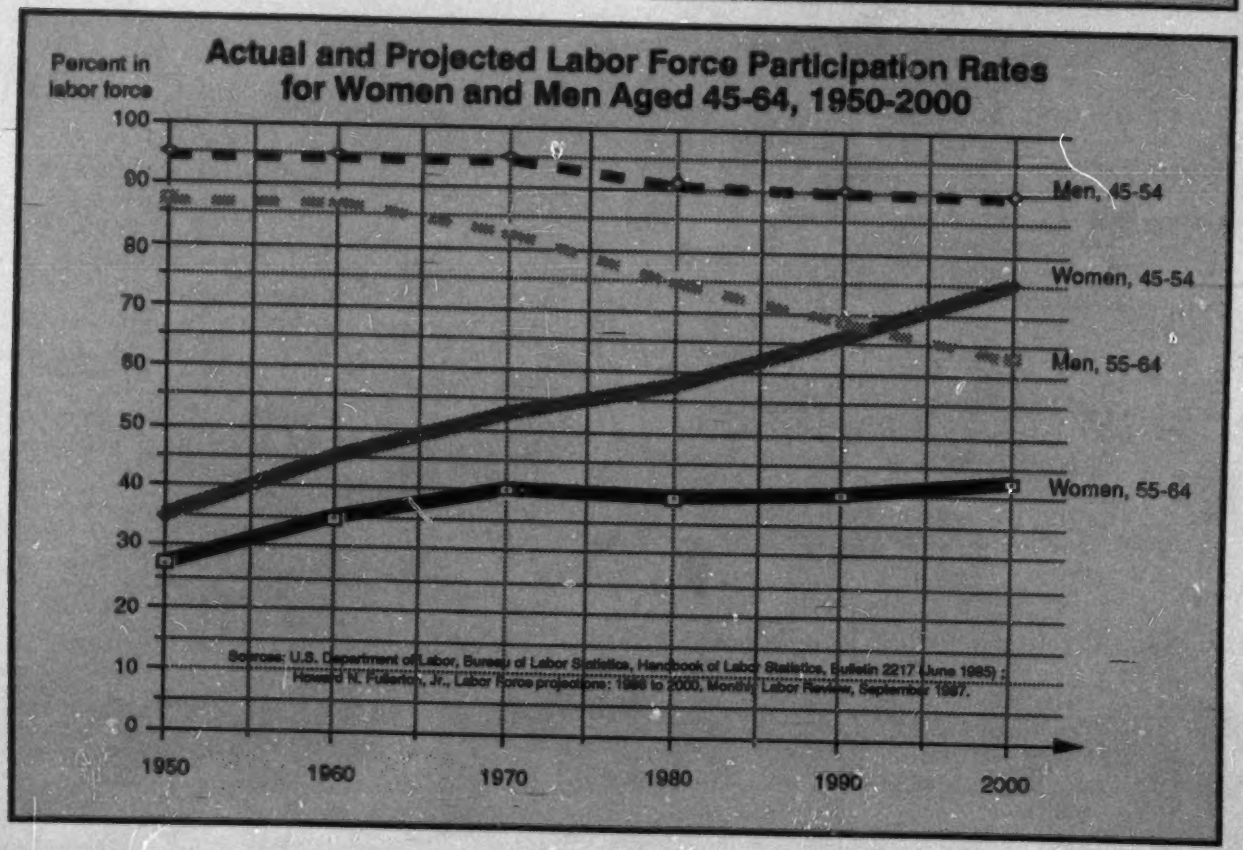
Source: Bureau of the Census, Projections of the Population of The United States by Age, Sex, and Race: 1988 to 2080, Series P-25, Table F, February 1989

Advances in medical technology have increased life expectancy, but living longer brings increased chances of illness and dependency. In 1986, the average life expectancy for women was 78.5 years and 71.5 years for men. By 2005, life expectancy will increase to 81 years for women and 74.1 for men. The incidence and impact of chronic illness increases with age. As chronic illnesses are "managed" rather than cured, they often require ongoing assistance and attention. In 1989, there were an estimated 7.1 million disabled elderly. By the year 2000, this number will increase to 8.9 million.

Fewer children will be available to care for the future generation of elderly. During the 1990s the total number of births will drop by 9.2%. Simultaneously, the elderly population will increase by over 10%. The number of elderly in the South and West will increase about 20%, with the greatest increases in Nevada (70%), Arizona (50%) and Florida (39%).

As more and more women enter the labor force, the need for affordable, quality elder and child care will increase. Fewer than one in ten families have a parent at home while the other parent works. Almost two-thirds of new employees in the next decade will be women, and by the year 2000 the work force will be 47% female. In 1970, 22 million working women had children under 18; by 1986 there were 37 million. Over half (52%) of all married mothers with infants under one year old are in the work force, as are over half the caregivers to the elderly (55%).





What's A Family To Do?

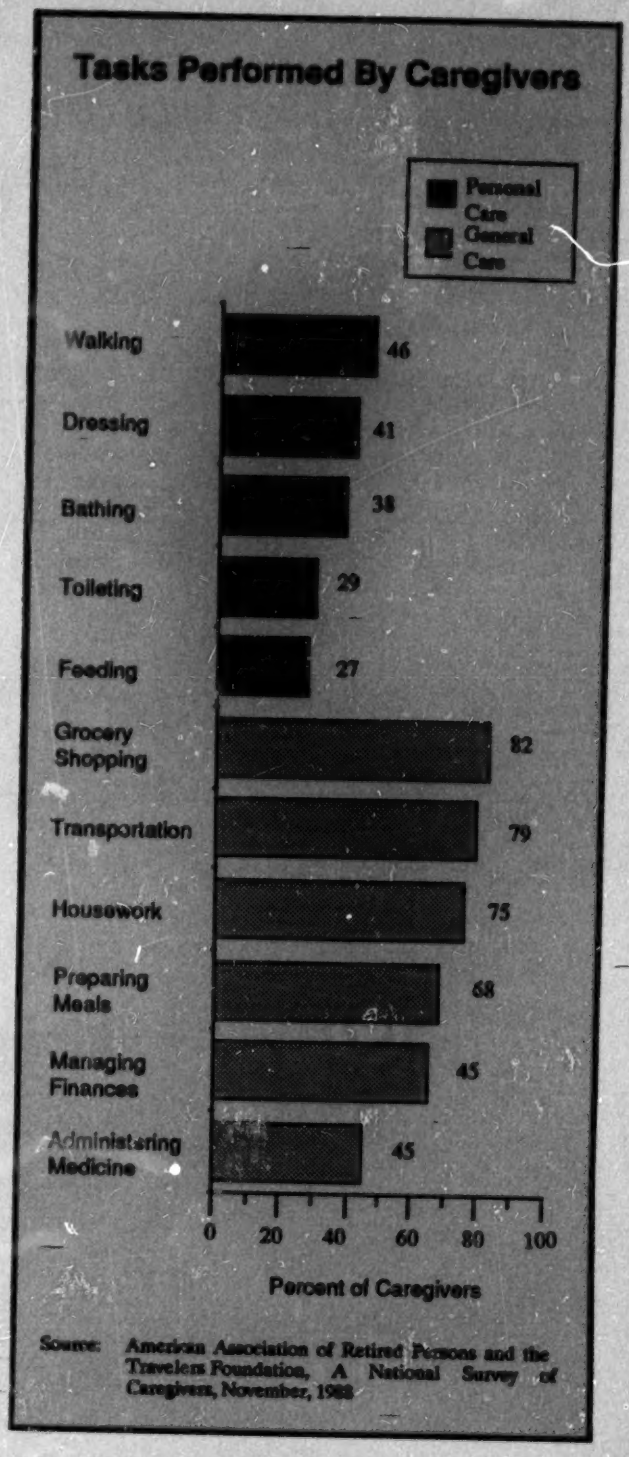
At present, few options exist for families with elder care or child care responsibilities. Most families are dual earning or single parent, leaving no one at home to provide full-time care. Older, retired caregivers urgently need assistance with the physical and emotional demands of elder care. Unfortunately, very little outside help is available either for elder or child care. That which does exist is expensive, of poor quality, or both.

Nursing homes—a question of cost, space, and quality. Median family income of the elderly is about $20,000 a year; the average annual cost of staying in a nursing home is $25,000. Many cost up to $50,000 a year. In almost every state occupancy rates in nursing homes average well over 90%. Discrimination against the poor is rampant in the competition for limited slots. Despite the high cost and limited supply, quality of care remains in doubt. A recent survey by the federal government showed that more than 40% of the nation's nursing homes do not meet sanitary standards for food and more than one in four fail to administer drugs properly. The high turnover and lack of training of nursing aides contributes to the low quality of care. A recently enacted federal law requires training for nursing aides, but a lack of federal funds may delay or undermine the success of the program.

Home health care and respite care services are limited nationwide. Forty-two states fund limited home care services, including respite care and homemaker and personal care services, through a waiver program under Medicaid. However, all these programs combined serve only 100,000 elderly and disabled Americans, fully half of them in five states: Florida, California, Illinois, Oregon, and New York. Meanwhile, one million seriously disabled elderly living at home receive no assistance at all. Only 13 states require training for home health care aides. Around-the-clock home care can cost up to $70,000 a year, with each home visit costing between $50-$200.

Families across the country are competing just to get their children and elders on waiting lists for day care, despite its high cost. Only 1,400 adult day care centers exist nationwide, serving 66,000 persons. There are long waiting lists to get into these programs, which can cost up to $50 a day. A California survey revealed that 136,254 families were waiting for child care slots. In New York State an estimated 830,000 to 1,200,000 children needed child care; there are fewer than 135,000 licensed available slots. The cost of child care can be prohibitive for young families, averaging $3,000 a year for one child. Infant care can cost $100 a week. No federal standards exist for child or elder care centers, and state standards vary.

At a time when the need for elder care and child care services is increasing, there is a growing shortage of workers in both fields. The Department of Labor has projected a need for over 535,000 new long-term care workers by the year 2000. For nursing aides the turnover rate is 70-100% each year. For home care aides, the rate is 60%, with 80-90% leaving within two years. Sixty-seven percent of family day care workers and 42% of workers in child care centers leave their jobs each year.



Source: American Association of Retired Persons and the Travelers Foundation, A National Survey of Caregivers, November, 1988

The Federal Government Does Little To Assist Caregivers

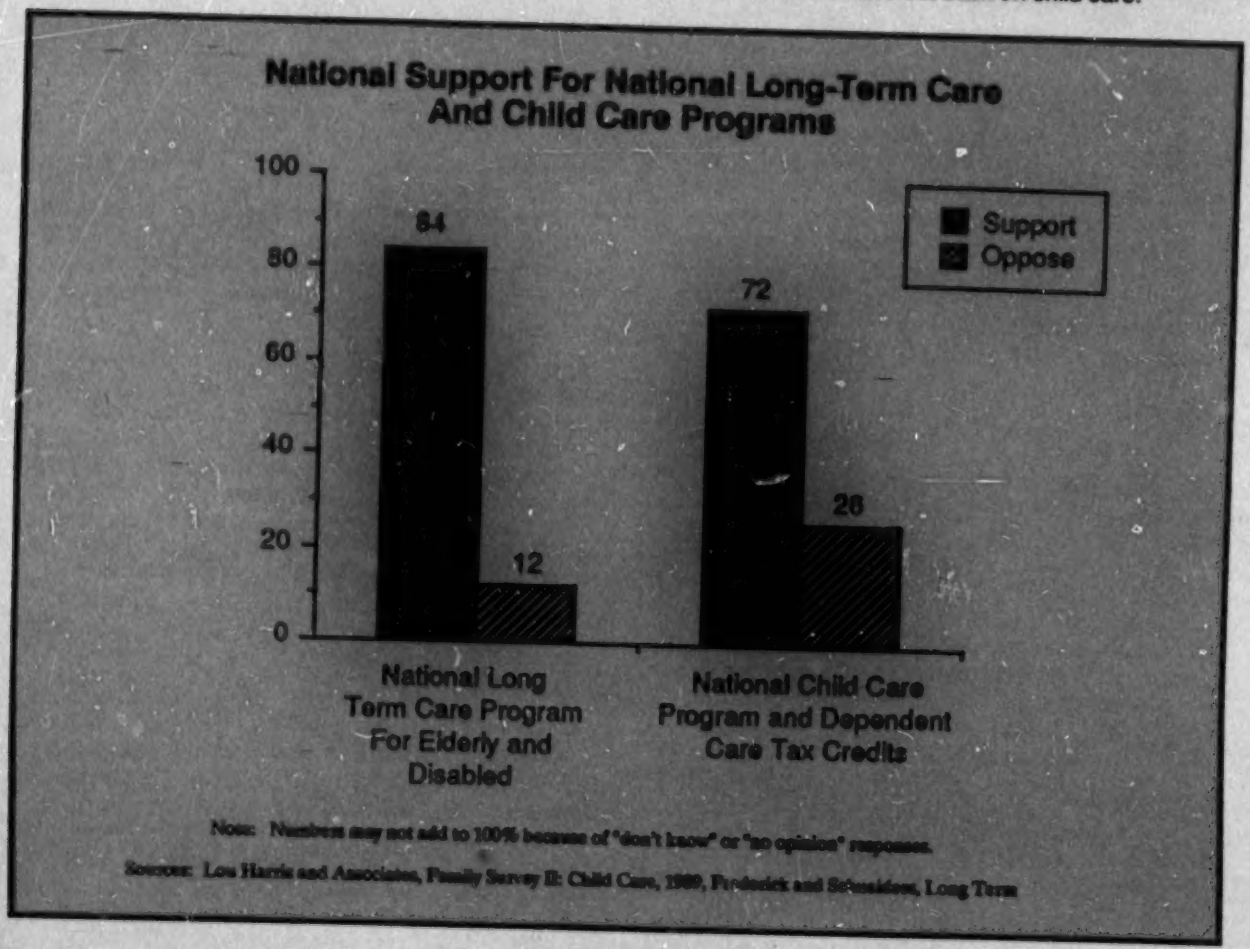
The United States and South Africa are the only industrialized countries without comprehensive health care or child care programs. Only a patchwork of federal and state programs exists to provide either elder care or child care assistance.

Less than five percent of total Medicare spending goes to cover long-term care services, including home health care and skilled nursing care. Designed to cover acute care costs, Medicare does not cover the costs associated with chronic illness, including nursing home care and home health care.

For families impoverished by health care costs, Medicaid will pay for institutionalization but provides very limited home care. A change in Medicaid eligibility under the new Catastrophic Coverage Act will allow a spouse caregiver to retain more income (122% of the federal poverty line) and resources (at least $12,000), while Medicaid would cover the cost to institutionalize her spouse. However, spousal impoverishment continues to exist for spouses who provide home care, as Medicaid covers very few of these costs. Therefore, a disabled spouse often must choose between premature institutionalization or draining his spouse's resources by remaining at home.

The Dependent Care Tax Credit has had a limited impact on caregivers. This credit can be used by employed families to subtract a portion of their child and elder care expenses from their federal taxes owed. Because the credit is not refundable, the many families that owe no taxes, and most lower-income families, are not reimbursed for their expenses. Additionally, very few families can use this credit for elder care expenses because of eligibility restrictions. The elder dependent must spend at least eight hours a day in the taxpayer's home and must be the taxpayer's financial dependent. With these restrictions, less than 10% of the $3.7 billion in tax credits are for the care of elderly dependents.

Despite the growing need, the federal government has cut back on money for elder and child care services. The federal government funds the Social Services Block Grant (Title XX of the Social Security Act) that is used by states to subsidize elder and child care services. Federal funding in 1989 of Title XX ($2.7 billion) is less than half what it was in 1977 (adjusting for inflation). Because of this federal reduction, 16 states have cut back on elder care services, while 26 have cut back on child care.


National Support For National Long-Term Care And Child Care Programs
100
80
60
40
20
0
84
12
72
28
Support
Oppose
National Long Term Care Program For Elderly and Disabled
National Child Care Program and Dependent Care Tax Credits
Note: Numbers may not add to 100% because of "don't know" or "no opinion" responses.
Sources: Lou Harris and Associates, Family Survey II: Child Care, 1989, Frederick and Schneiders, Long Term

Impact Of Caregiving On Caregivers

Given the lack of supportive services, family caregivers bear the brunt of the burden. Without the proper help, the rewards of caregiving are often overshadowed by the demands. Some of the demands are similar whether caregiving to adults or children. Caregiving can take time away from family, friends, and social activities, cause strife at work or an unplanned exit from the work force, and drain already-tight budgets.

Yet despite some similarities, important differences exist between caring for a healthy child and caring for a disabled person—either a child or adult. The costs of a chronic illness can impoverish families, while the emotional and physical impact can be devastating.

Women's Income In Comparison To Men's

Annual Median Income	Men	Women	Women's As % Of Men's
Total	$26,722	$17,504	66%
20-24	14,665	12,903	88%
25-34	23,804	17,583	74%
35-44	30,655	19,897	65%
45-54	32,821	19,087	58%
55-64	30,946	17,831	58%
65+	29,715	19,178	65%
Mean Monthly Pension Income			
65+	$670	$370	55%
Percent Receiving	45.2%	21.5%	
Median Monthly Social Security Income	$521	$440	84%

Sources: Bureau of the Census, Money Income and Poverty in the United States: 1987, Tables 7-8; American Association of Retired Persons, Facts About Older Women, 1987; Bureau of the Census, March 1987 Current Population Survey, unpublished data; Social Security Administration, Social Security Bulletin, 1987.

Caregiving duties bear directly on women's lower wages, lower pension earnings, lower social security benefits, and higher health care costs. The direct costs to women who provide care are evident: $3,000 per child per year for child care; $70,000 per year for around-the-clock home care; $25,000 a year for nursing home care. With a longer life expectancy and no public health care coverage of chronic illness, many women can expect to spend their "golden years" drained of their income from a caregiving experience. The hidden financial costs to the caregiver of leaving the work force or accepting less demanding jobs are equally important and often overlooked.

Mainly due to caregiving responsibilities, women average 11.5 years out of the paid labor force, while men average 1.3 years. In a national survey, 11% of the caregivers to the elderly stated they left work because of caregiving responsibilities. Another study reported over a quarter (28%) of working caregivers were considering giving up their jobs.

Even when women do not leave the labor force, they often choose jobs with fewer demands and less pay because of caregiving duties. The average earnings of a working woman who gives birth drop $3,000 the first year and about $5,000-6,000 annually the next two years. The wage gap between women and men is greatest between age 45 to 64, when full-time male workers are at the height of their earning power and women are earning basically what they did in younger years.

Family caregivers to the elderly are disproportionately poor. Nearly one in three caregivers to the elderly are poor and 57% have lower or middle incomes. Caregiving wives and other caregiving women are more likely than caregiving men to be poor or near-poor. Both male and female caregivers to the elderly are more likely to have incomes below poverty compared to the population at large.

The physical and emotional demands of long-term caregiving can create health problems. Caregivers often postpone attending to their own medical needs while the care recipient is in their care. Many caregivers, particularly midlife and older women, suffer from the physical distress known as "caregiver's syndrome," developed from years of physical strain in the care of parents and then spouses. Lifting and turning a disabled adult can result in bursitis, can damage the spine and lower back, and can quicken the advance of osteoporosis. Repetitive, heavy lifting can increase even younger caregivers' chances of developing arthritis.

Researchers have found that caring for a loved one whose condition is deteriorating can lead to depression, anxiety, frustration, helplessness, sleeplessness, lowered morale, and emotional exhaustion. Caregivers of elders with Alzheimer's disease, particularly older women who live with and take care of their husbands, report high levels of stress and low levels of life satisfaction.

Conflicts Between Work and Family

The working world was not designed with the family in mind. In the past, women cared for children and elders at home. As more and more women seek employment out of economic necessity, women are experiencing serious conflicts between job and family responsibilities. Over half the caregivers of elders and infants and more than seven out of ten women (71%) with children under 18 are employed full-time.

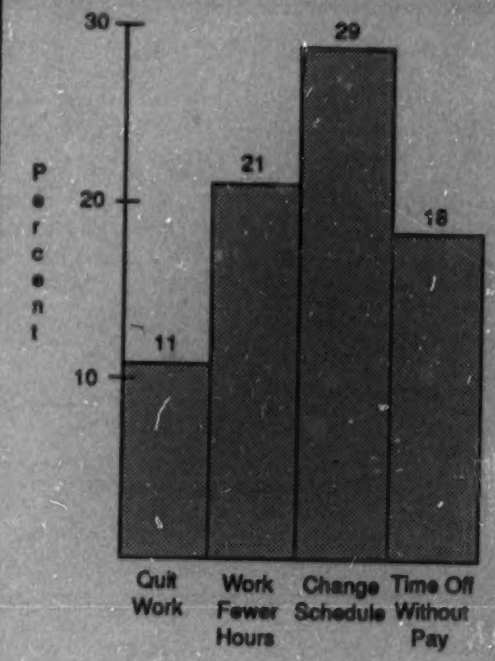
Men's caregiving responsibilities, though still not as great as women's, have an impact upon their work performance. Times have changed—but most employers have not. If employers continue to ignore the needs of their workers, most of whom are caregivers, work productivity will suffer. If rather than adapting business practices to workers' real world responsibilities, employers consciously or unconsciously are placing workers with families on a slower "mommy track," these employers will discover that mothers are not the only employees with work and family conflicts. Indeed, only orphans with no children could be placed on the fast track to professional success.

Job performance can suffer from caregiving responsibilities. A survey of managers found many reporting excessive telephone use by caregiving employees (64%), absenteeism (67%), lateness (73%), and unscheduled time off from work (75%). Almost half the corporate respondents noted decreased productivity and work quality. Almost three in five women, and one in three men say that child care concerns interfere with work. More than one in five (22%) employees caring for elders report they have not had a vacation from caregiving responsibilities for a year or more.

Few employers offer flexible work schedules to assist caregivers. Compulsory overtime and rotating shifts are common in many occupations, making scheduling of caregiving difficult. Only about 12% of full-time workers can vary the time they begin or end work. Seven in ten working mothers want part-time employment, flexible hours, or work they can do in their homes. Fully one-third of employed caregivers to the elderly report they have lost time from work or have come in late as a result of caregiving duties.

Few employers provide supportive services for caregivers. Only 200 of the nation's six million employers offer any assistance with elder care, with 100 of these simply providing long-term care insurance. Stride Rite Corp. will be opening the first corporate-sponsored intergenerational care center, providing both elder and child care. Presently, only about 4,000 employers provide any child care services, with the vast majority providing information and referral services only. Several large employers, including IBM and Hallmark Cards, offer referral services toemployees for day care for children, elders, and disabled family members. Remington Products pioneered a respite care program, paying half the cost of care for a limited period of time. Travelers Corp. sponsors lunchtime information seminars and weekly support groups for caregivers of elders.

Working Caregivers To The Elderly Adjust Work Schedules To Give Care



Source: 1982 Long-Term Care Survey/Informal Caregivers Survey

Seven states have enacted Family and Medical Leave legislation to provide job protection for caregivers who need a temporary leave. Some employers fire workers who need a temporary leave to handle a family crisis. Three states now provide job protection for a caregiver on temporary leave after the birth, adoption, or serious health condition of a child: Oregon, Rhode Island, and Minnesota. Four states also recognize that caregiving includes the care of a seriously ill spouse or parent: Maine and Wisconsin for the private and public sector, and Maryland and Connecticut for state employees only.

Women Who Care

"In looking back, I can't help but compare the birth of a newborn and the care it requires with the care of a terminal patient. They are both very dependent on their mother/caregiver. Observe the networking that goes on when a newborn makes an entrance into our world. I was always surrounded with help and information when my babies were born.... On the other hand, the subjects of the bedridden cancer patient and the probable death are subjects that are avoided, even ignored. There is a definite need for information in dealing with death, no matter what the loved one's age. Death and dying are taboo subjects. No one wanted to talk to Mother and me, though we needed to talk about it."

— Dorothy, a caregiver to both her mother, who was recovering from eye surgery, and her father, who was dying of cancer.

"Age 75, in good health, describes me-but many of our friends and acquaintances have not had this good luck. Examples are all around us of the need to improve day care and respite care for adults and children. Money—as well as lives—could be saved by relieving the unbearable burdens many—most often women—carry through both youth and old age. Improve home care-and avoid institutional (expensive!) care as long as possible."

— OWL member, Connecticut
Mother's Day 1989

"The problem of caregiving faced our family. For 10 years my sister gave up her own personal life to care for our elderly parents. She was unable to get adequate help so was frequently faced with caring for them 24 hours a day. Luckily, being a teacher, I had long vacations so I traveled to their home to help out during all of these vacations. Finally, it became too much of a responsibility. Reluctantly they had to be in a nursing home for the last two years of their lives."

— OWL member, Washington
State Mother's Day 1989

"There should be some kind of 'bill of rights' for caregivers spelling out that you can only give what you give. And that should be acceptable. You shouldn't be criticized if you can't do more. And this bill of rights should include things you have to do for yourself. You have to be a caregiver for yourself, also. Unfortunately, in marriage, a woman ends up being a caregiver meeting her husband's needs. But there is nobody meeting her needs."

— Jill, a caregiver to her husband who suffered from Parkinson's disease.

"Among the people who called [the Philadelphia Geriatric Center] for help in one typical day were: an exhausted, 70-year-old woman who could no longer go on caring for her disabled, 93-year-old mother; a recently widowed 50-year-old who had just completed her education in preparation for a return to work, but found that her mother had Alzheimer's disease and could not be left alone; a couple in their late 60s with three frail parents between them; a divorcee of 57 who was caring for two disabled sons, a 6-year-old grandchild, and an 87-year-old wheelchair bound mother; and a young couple in their early 30s, about to have a first child, who had taken two older people into their home—the wife's terminally ill mother and the confused, incontinent grandmother for whom the mother had been caring."

— Elaine Brody, Philadelphia
Geriatric Center

"Then we were suddenly faced with my father's incontinence. He was terribly embarrassed, but I told him, 'you cleaned me up once and now it's my turn.' We laughed together as he said, 'I always refused to do that job.' Then he lost his ability to shave and wash himself. This meant 'big kid' diapers (as my children called them) and my growing even more muscles to lift him in and out of the bathtub. With time, my father became more and more quiet, often staring into his lap for long hours. He missed my mother. He forgot he was holding his cigarette and would burn his fingers or his clothes. From then on, I couldn't leave him alone. I remember with humor the day he looked at me and said, 'Marg, I wish I could get on a motorcycle and hit the road!' I realized then how much he suffered by being so restrained."

— Margaret

Sources: Tish Sommers and Laurie Shields, Women Take Care: The Consequences of Caregiving in Today's Society, 1987; Elaine M. Brody, "Parent Care as a Normative Family Stress," The Gerontologist, vol. 25, no. 1, 1985.

Acknowledgments:

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Membership and Publication Information

This 1989 Mother's Day Report by the Older Women's League is the fourth in a series begun three years ago with OWL's *Report on the Status of Midlife and Older Women in America*. That report made clear that the dream of a secure golden age is nothing short of a fairy tale for millions of midlife and older women. In 1987, *The Picture of Health for Midlife and Older Women* focused the spotlight on the health and health care problems women face as they age. Last year, *The Road to Poverty* examined the economic problems that plague women throughout life, and the resulting poverty when women reach their later years. This year, *Failing America's Caregivers* reports on the impact of caregiving responsibilities on family caregivers to the elderly and to children.

Making these invisible problems visible was the main goal of the Older Women's League when it was founded in 1980. OWL is a nonprofit membership organization, the first national organization to focus solely on midlife and older women's concerns. It strives to achieve economic and social equity for older women, to improve their image and status, and to provide mutual support for its members. In just nine years, OWL has become firmly established as a national voice for older women—a segment of the population that has long been unrepresented.

OWL was conceived by two California women, Tish Sommers and Laurie Shields, whose earlier work to eradicate the job inequities midlife and older women face helped to create the displaced homemakers movement. Although Sommers died in 1985, and Shields died in March of this year, their legacy continues in the more than 120 OWL chapters throughout the United States. Sommers and Shields were co-authors of a book, *Women Take Care*, on caregiving and its consequences for women who care. Shields, who helped to found both the older women's and the displaced homemakers' movements, spoke often about the need for a national caregivers' movement. OWL has established a fund in her memory dedicated to grassroots activities for older women.

OWL's national agenda, set by its members, consists of seven education and advocacy issues: Social Security reform, pension rights, job discrimination, access to health care, family caregivers, federal budget priorities, and staying in control to the end of life. Education takes many forms: consumer reports and pamphlets, the bi-monthly OWL OBSERVER, testimony before legislatures, media outreach, the Gray Paper series, and conferences and leadership training. OWL's leaders come mostly from local chapters, whose members work on the national agenda, on state and local concerns, and on bringing women together for mutual support.

OWL's motto is "Don't agonize—organize!" You are invited to join OWL to show that you care too and to work to secure brighter futures for America's caregivers.

To get involved, or to learn more, return the form below to:
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THE ROAD TO POVERTY: A Report on the Economic Status of Midlife and Older Women (1988)

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WOMEN AND PENSIONS: CATCH 22 (1989)

HEALTH CARE FINANCING AND MIDLIFE WOMEN: A Sick System (1986, 1988 Insert on Catastrophic Law)

BOOKS AND REPORTS

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CHRONIC CARE WORKERS: Crisis Among Paid Caregivers of the Elderly (1988)

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TAKING CHARGE OF THE END OF YOUR LIFE: Proceedings of a Forum on Living Wills and Other Advance Directives, 69 pp. (1987)

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